

RECEIVED
CENTRAL FAX CENTER
AUG 02 2005

FAX COVER SHEET
BANIAK PINE & GANNON
Intellectual Property Attorneys
150 N. Wacker Drive, Suite 1200
Chicago, Illinois 60606
Telephone 312-673-0360
Facsimile 312-673-0361

Date: August 2, 2005
To: Examiner M. Desanto, Art Group 3763
U.S. Patent & Trademark Office
Fax No: 571-273-4957
From: Steven B. Courtright
Tel. No: 312-673-0360
Re: U.S. Serial No. 09/901,509 , filed July 9, 2001

Client No.: 5297/148
No. of Pages including this page): 10

IF YOU HAVE ANY PROBLEMS RECEIVING THIS MESSAGE,
PLEASE CALL 312-673-0360 AND ASK FOR Lisa Pistorio

THIS MESSAGE IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL, ATTORNEY WORK PRODUCT, OR TRADE SECRET INFORMATION WHICH IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, OR AN EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS MESSAGE IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE (AND ALL COPIES) TO US BY MAIL AT THE ABOVE ADDRESS. WE WILL REIMBURSE YOU FOR POSTAGE.

Please find attached a Transmittal Form, Request for Extension, and a 2nd Response to the Official Action dated February 9, 2005.

RECEIVED
OIPE/IAP

AUG 04 2005

08/02/2005 16:23 FAX 3126730361

BANIAK PINE & GANNON

AUG 02 2005

PTO/SB/21 (12-87), Approved for use through 2008. GPO: 2001-0001, Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paper Reduction Act of 1995, no person is required to respond to a solicitation of information unless it displays a valid GPO control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Attorney Docket No.	5297/148
	Application Number	08/901,509
	Filing Date	July 9, 2001
	First Named Inventor	Brian H. SILVER
	Group Art Unit	3783
	Examiner	M. Desanto

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Amendment / Response to Restriction/Election Req. <input checked="" type="checkbox"/> (2 nd) After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Fax Cover Sheet <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-0930. A duplicate copy of this sheet is enclosed.		

CALCULATION OF FEE

				Small Entity		Large Entity	
Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus	0	x \$9=	0	x \$18=	
Indep.		Minus	0	x \$42=	0	x \$84=	
First Presentation of Multiple Dep. Claim				+ \$140=	—	+ \$280=	
				total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Michael H. Baniak, Reg. No. 30,608 Attorney for Applicant(s) Steven B. Courtwright, Reg. No. 40,968 Agent for Applicant(s) BANIAK PINE & GANNON 160 N. Wacker Drive, Suite 1200 Chicago, Illinois 60606	
Signature		Date: August 2, 2005
CERTIFICATE OF TRANSMISSION		
I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents at the United States Patent and Trademark Office to Fax No. 571-273-4957		
Signature		Date: August 2, 2005
Michael H. Baniak/Steven B. Courtwright		

PTO/SB/01 PG.47: Approved for use through 09/06/00. OMB 0451-0051. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paper Reduction Act of 1992, no person are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	5297/148
	Application Number	09/901,509
	Filing Date	July 9, 2001
	First Named Inventor	Brian H. SILVER
	Group Art Unit	3763
	Examiner	M. Desanto

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Amendment / Response to Restriction/Election Req. <input checked="" type="checkbox"/> (2 nd) After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Extension of Time Request (dupic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/66) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Fax Cover Sheet <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fee which may be required, or credit any overpayment, to Deposit Account No. 50-0830. A duplicate copy of this sheet is enclosed.		

CALCULATION OF FEE

				Small Entity		Large Entity	
Claims After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total	Minus	0	x \$9=	0		x \$18=	
Indep.	Minus	0	x \$42=	0		x \$84=	
First Presentation of Multiple Dep. Claim			+ \$140=	-		+ \$280=	
			total add'l fee			total add'l fee	
						\$ 0	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Michael H. Baniak, Reg. No. 30,608 Attorney for Applicant(s) Steven B. Courtright, Reg. No. 40,966 Agent for Applicant(s) BANIAK PINE & GANNON 150 N. Wacker Drive, Suite 1200 Chicago, Illinois 60606		
Signature		Date:	August 2, 2005
CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents at the United States Patent and Trademark Office to Fax No. 571-273-4957			
Signature		Date:	August 2, 2005